

For office use only:

☐ \$25 Processing Fee Paid _____

☐ 1st ☐ 2nd ☐ 3rd ☐ 4th

Special License for License Year _____

Form CG-Schedule-A
Rev. 2/06

**Commonwealth of Kentucky
Public Protection & Regulation Cabinet
OFFICE OF CHARITABLE GAMING**

APPLICATION FOR CHARITY FUNDRAISING EVENT LICENSE OR SPECIAL LIMITED CHARITY FUNDRAISING EVENT LICENSE

ORGANIZATION INFORMATION

1. **Name of Charitable Organization :** _____
2. **License number: ORG-** _____ **Expiration date:** _____

EVENT INFORMATION

- | 3. | Date(s) of event: | Date | Beginning time | Ending time |
|----|-------------------|----------------|----------------|-------------|
| | DAY 1 | ____/____/____ | _____ am pm | _____ am pm |
| | DAY 2 | ____/____/____ | _____ am pm | _____ am pm |
| | DAY 3 | ____/____/____ | _____ am pm | _____ am pm |

NOTE: When applying for more than one event, submit a separate CG-Schedule-A for each event.

4. **Street address of location at which charitable gaming will be conducted:**

Name of Building: _____

StreetAddress: _____

City,State, and Zip _____

County: _____

A copy of a signed lease agreement or statement of other understanding between the organization and the owner of the premises **must** be submitted with this application.

5. **Please list the approximate NUMBER of tables/booths for each type of gaming activity to be conducted:**

_____ Bingo (only count as 1)	#_____ Blackjack
#_____ Horse Race Bingo	#_____ Poker
#_____ Prerecorded Horse Racing	#_____ Dice Games
_____ Pulltabs (only count as 1)	#_____ Roulette
#_____ Raffles	#_____ Keno
#_____ Non-Cash Prize Wheel Games	#_____ Baccarat
(Prize value does not exceed \$100)	#_____ Pusher-Type Games
#_____ Duck Race	#_____ Money Wheels (Cash Prizes)
#_____ Horse Power Bingo	#_____ Texas Hold'em _____Date _____ Time
	#_____ Horse Race by Roll of Dice
*Other _____	*Other: _____



*Brief description of **other** game listed above (*other*) and explanation of how prizes are awarded:

Note: KRS 238.505(8) defines a “charity fundraising event” as a fundraising activity of limited duration at which games of chance approved by the Office are conducted including bingo, raffles, charity game tickets, special limited charitable games, and wagering on pre-recorded horse races, KRS Chapter 230 notwithstanding. Examples of such activities include events that attract patrons for community, social, and entertainment purposes apart from charitable gaming, such as fairs, festivals, carnivals, and bazaars.

6a. Will the gaming activities listed in question 5 be conducted at an event that is otherwise described as a fair, festival, carnival, or bazaar?

☐ Yes or ☐ No (If no, go to question 7)

6b. Please state the official name of the event (fair, festival, carnival, or bazaar), as it will be advertised to the general public (i.e. abc county fair, xyz church summer festival, Christmas bazaar).

6c. Please describe all non-gaming activities to be conducted at this event that reflect the conduct of a fair, festival, carnival, or bazaar. (An example would be carnival rides, fish fry, motivational speakers, craft booths, golf tournament, 5k race, etc.)

DISTRIBUTOR INFORMATION

7. Distributor(s) applicant will use to obtain charitable gaming equipment or supplies:

Name: _____	Name: _____
KY. license number: Dis- _____	KY. license number: Dis- _____
Address: _____	Address: _____

Name: _____	Name: _____
KY. license number: Dis- _____	KY. license number: Dis- _____
Address: _____	Address: _____

(Attach additional sheets, if necessary)

A copy of the Written Agreement between the organization and the distributor must be submitted within thirty (30) days of the event if this is a Special Limited Charity Fundraising Event.

CERTIFICATION (BY AN OFFICER)

I certify, under penalty of perjury, that I am an officer authorized by the applicant to make application for licensure and that I have examined this application for licensure, including accompanying materials, and all information submitted is, to the best of my knowledge and belief, true and correct. I further certify that the applicant agrees to comply with all applicable laws and administrative regulations regarding charitable gaming in the Commonwealth of Kentucky.

Signature: _____

Print name: _____

Title: _____

Date: _____

Mail completed application (including all required attachments), together with the \$25.00 processing fee made payable to "Kentucky State Treasurer" to:

Commonwealth of Kentucky
Public Protection & Regulation Cabinet
Office of Charitable Gaming
Division of Licensing & Compliance
132 Brighton Park Boulevard
Frankfort, KY 40601

If you need any help completing this application, please call the Licensing branch at (502) 573-5528 or toll-free in Kentucky, (800) 729-5672.

Visit our website at:

<http://www.ocg.ky.gov>

\$25.00 PROCESSING FEE IS REQUIRED FOR EACH SCHEDULE A.